



## NEW HOMEBUYER INCENTIVE PROGRAM APPLICATION

PLEASE PRINT OR TYPE INFORMATION

The information you provide to the City, including any documentation, is considered to be a public record and will be made available to other persons or entities upon request in accordance with Chapter 119, Florida Statutes. You will be asked to provide documentation to prove that this residence was purchased as a foreclosed property from a Lending Institution that foreclosed on the residence or as a short sale. Documentation may include the Warranty Deed, and the fully executed HUD-1 Statement.

1. **OWNER/BUYER:** \_\_\_\_\_
2. **PROPERTY ADDRESS:** \_\_\_\_\_
3. **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_
4. **PHONE NO.:** \_\_\_\_\_ **ALTERNATE PHONE NO.:** \_\_\_\_\_
5. **DO YOU HAVE A CONTRACT ON THIS PROPERTY?** \_\_\_\_\_
6. **ESTIMATED CLOSING DATE ON PROPERTY?** \_\_\_\_\_
7. **LIST ALL PROPOSED HOUSEHOLD OCCUPANTS:**

NAME	RELATIONSHIP TO OWNER/BUYER
8. **WAS THE HOUSE INSPECTED BY A RESIDENTIAL PROPERTY INSPECTOR?** \_\_\_\_\_
9. **IS THIS PROPERTY A FORECLOSED PROPERTY OR SHORT SALE?** \_\_\_\_\_
10. **DESCRIBE THE PROPOSED IMPROVEMENTS TO THE RESIDENCE (INTERIOR & EXTERIOR):**

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**CERTIFICATION:**

*(The singular "I" as used herein shall mean the plural "We" if more than one person applies and corresponding verbs and pronouns such as "am/are" shall be construed accordingly to the proper number):*

I HEREBY CERTIFY that I have read and agree to the New Homebuyer Program – Program Description Summary ("Program") and that, in accordance with Program guidelines, I am applying for the New Homebuyer Incentive Program in the amount up to \$2,000, to be used solely for necessary improvements or costs associated with building code or building system related improvements. The Program funds shall be used for one or a combination of more than one of the following eligible purposes: landscaping and irrigation, roof replacement, electrical including GFI receptacles, smoke detectors, electrical upgrades to 150 amp, storm shutters, windows, exterior doors, new energy efficient air conditioning, energy efficient appliances, and exterior house painting. I agree that I will provide all receipts, invoices, and obtain or otherwise demonstrate that all applicable work has been permitted and inspected by the City of Sunrise Building Division and/or the Engineering Division. All work is subject to inspection by the City of Sunrise prior to reimbursement. All materials and supplies purchased through this Program shall be new or replacements. Repairs are not eligible for Program reimbursement.

I FURTHER UNDERSTAND THAT IF ANY BUILDING OR CODE VIOLATIONS ARE IDENTIFIED ON THE SUBJECT PROPERTY, THAT THEY MUST BE COMPLIED WITH NO LIENS PRIOR TO ME RECEIVING REIMBURSEMENT FROM THE CITY OF SUNRISE UNDER THE PROGRAM. THIS APPLIES TO BUILDING OR CODE VIOLATIONS EVEN IF UNRELATED TO THE PROGRAM.

I understand that failure to provide any requested information may result in a delay or determination of ineligibility. I consent to allow the City to request information based upon my application for the purpose of verifying my eligibility. I understand that I have six months from date of purchase of the subject home to submit all receipts and to meet all Program requirements to be eligible for reimbursement. I understand that I must purchase the home between July 1, 2011 and June 30, 2013.

I understand that if I wish to dispute eligibility determinations made by the City, I must follow the reconsideration process and submit a Request for Reconsideration form with supporting information and documentation. Failure to submit the Reconsideration form, documentation or information may result in a delay or determination of ineligibility under the reconsideration process. All reconsideration decisions by the City will be final. I also understand that if I cash, deposit or transfer a Program assistance payment, I will not be able to be reconsidered for any further assistance under this Program.

I certify that I have received, read and understand the Program Description Summary, Application Instructions, and Application and I agree to be bound by the terms and conditions of the Program.

I hereby certify that all information provided on or in support of this application is true and correct.

Owner/Buyer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Owner/Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn (or affirmed) and subscribed before me, a Notary Public, this \_\_\_\_ day of \_\_\_\_\_, 201\_\_, by \_\_\_\_\_ who is either \_\_\_\_ personally known to me, or \_\_\_\_ produced \_\_\_\_\_ as identification, and who did take an oath.

Seal / Commission Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature  
Print Notary Name: \_\_\_\_\_  
State of Commission: \_\_\_\_\_

Sworn (or affirmed) and subscribed before me, a Notary Public, this \_\_\_\_ day of \_\_\_\_\_, 201\_\_, by \_\_\_\_\_ who is either \_\_\_\_ personally known to me, or \_\_\_\_ produced \_\_\_\_\_ as identification, and who did take an oath.

Seal / Commission Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature  
Print Notary Name: \_\_\_\_\_  
State of Commission: \_\_\_\_\_

FOR CITY STAFF USE ONLY:			
BCPA Ownership:		<div></div> <div></div>	
Property ID No.:	<div></div>	Grants:	Incentive <div></div> <div></div> Ineligible
Intake:	<div></div>	Date:	<div></div>
	Initials		Date:
Homestead (Yes/No):	<div></div>	Initials:	<div></div>
		Director:	<div></div> Incentive <div></div> <div></div> Ineligible
		Initials:	<div></div>
		Date:	<div></div>